



Kiwaniis

Club of Tempe

YOUR APPLICATION FOR MEMBERSHIP IN THE KIWANIS CLUB OF TEMPE

Kiwaniis Club of Tempe has a long legacy of serving children in our community, which is the direct result of its outstanding membership and leadership. Thank you for your interest in participating in this continuing legacy, of which KCOT is most proud.

Please complete the attached Application for Membership form and bring the application to a KCOT meeting. The application should be given to your KCOT sponsor, the Secretary, or Satellite Liaison, if you intend to join our satellite club. Proposed members, in addition to the signature of a sponsor who is a member in good standing, shall also obtain an endorsement from at least one additional active KCOT member. Membership applications will be submitted to the full Board of Directors for consideration at the next regularly scheduled board meeting.

As you contemplate membership, we ask that you consider the following:

- Members and representatives are expected to regularly attend our Thursday lunch meetings, or monthly Satellite meetings.
- Members and representatives are expected to lend their leadership skills and expertise to our committee activities and service projects on an ongoing basis.
- At the discretion of the Board, any active member who fails to regularly attend meetings, participate in club activities, or remain in financial good standing with the club may be suspended by a majority vote of the Board per KCOT Bylaws.

Fees:	Traditional	Satellite	Corporate	Nonprofit
Application/induction fee due with application*	\$100	\$100	\$100	\$100
Annual dues/billed quarterly**	\$164/\$41	\$164/\$41	\$164/\$41	\$164/\$41
Thursday meeting meal charge	\$16/meal***	\$16/meal when in attendance	\$16/meal***	\$16/meal***
Use of Company name and logo at KCOT events			\$100/quarter	

*Covers the costs for badge, pin, application/induction fees assessed by Kiwanis International and the Southwest District of Kiwanis International, and other materials. If for any reason your application is not approved, the fee will be refunded in full.

**This amount includes your KCOT dues, Kiwanis International dues, Southwest District dues, member liability insurance, and subscription costs for the Kiwanis International Magazine. Additional assessments will be included on the billing for member participation in parties, banquets and events, or for guests brought to lunch.

***Members and representatives who are not Satellite members are assessed \$16 for one lunch per month whether or not they are in actual attendance or eat one meal. They are billed \$16 per meal for additional meals eaten during the quarter.



Kiwaniis

Club of Tempe

- Traditional Satellite
- Nonprofit Corporate

Application for Membership

Thank you for choosing the Kiwanis Club of Tempe, our city's "Club of Clubs." Please complete the attached Application for Membership form and bring the application to a KCOT meeting. The application should be given to your KCOT sponsor, the Secretary, or Satellite Liaison (if you intend to join our satellite club). Our Board of Directors will consider your application for membership at its next regularly scheduled monthly meeting. In the meantime, we hope you will continue to join us at our regular club meetings. We are happy to have met you!

FULL NAME, AS YOU WOULD WANT IT TO APPEAR ON OUR MEMBER ROSTER:	NICKNAME:	DATE OF BIRTH (MM/DD/YY)	TODAY'S DATE:
HOME ADDRESS:			HOME PHONE:

BUSINESS NAME:	BUSINESS ADDRESS:	BUSINESS PHONE:
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YOUR TITLE OR PROFESSION (FORMER PROFESSION IF RETIRED):	PREFERRED MAILING ADDRESS: <input type="checkbox"/> HOME <input type="checkbox"/> BUSINESS
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BUSINESS TYPE: <input type="checkbox"/> BANK'G/FINANCE <input type="checkbox"/> COMM./MEDIA <input type="checkbox"/> CONSTRUCTION <input type="checkbox"/> EDUCATION <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> LEGAL <input type="checkbox"/> MANUFACTUR'G <input type="checkbox"/> MEDICAL <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> REAL ESTATE <input type="checkbox"/> RELIGION <input type="checkbox"/> RETAIL <input type="checkbox"/> TRANSPORTAT'N <input type="checkbox"/> WHOLESALE <input type="checkbox"/> AGRICULTURE <input type="checkbox"/> OTHER	YOUR POSITION: <input type="checkbox"/> ELECTED <input type="checkbox"/> MANAGEMENT <input type="checkbox"/> PARTNER/OWNER <input type="checkbox"/> PROFESSIONAL <input type="checkbox"/> SALES <input type="checkbox"/> SUPERVISION <input type="checkbox"/> TECHNICAL <input type="checkbox"/> RETIRED <input type="checkbox"/> OTHER
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EDUCATIONAL BACKGROUND (COLLEGES, UNIVERSITIES, MAJORS, DEGREES, DATES): PLEASE SELECT THE HIGHEST LEVEL OF EDUCATION ATTAINED: <input type="checkbox"/> HIGH SCHOOL <input type="checkbox"/> TECH/BUSINESS SCHOOL <input type="checkbox"/> ASSOC. DEGREE <input type="checkbox"/> BACCALAUREATE DEGREE <input type="checkbox"/> MASTER'S DEGREE <input type="checkbox"/> GRAD/PROF DEGREE
HOW HAVE YOU BEEN INVOLVED IN OUR COMMUNITY (PAST AND CURRENT SERVICE WORK, LEADERSHIP POSITIONS, MEMBERSHIP IN OTHER ORGANIZATIONS)

HAVE YOU BELONGED TO ANY OTHER KIWANIS CLUB? <input type="checkbox"/> CURRENT MEMBER (I INTEND TO BELONG TO BOTH CLUBS) <input type="checkbox"/> FORMER MEMBER <input type="checkbox"/> TRANSFER			
NAME OF CLUB:	CITY & STATE:		
DATE YOU RESIGNED FROM FORMER CLUB:	DATE YOU ORIGINALLY JOINED KIWANIS:	MEMBER ID#:	LIFE MEMBER #, IF ANY:

HAVE YOU BELONGED TO A CIRCLE K, KEY CLUB, OR BUILDERS CLUB?		
CLUB	CITY/STATE	DATES OF MEMBERSHIP
CLUB	CITY/STATE	DATES OF MEMBERSHIP

HOW DID YOU HEAR OF THE KIWANIS CLUB OF TEMPE?
WHY DO YOU WISH TO JOIN OUR CLUB?

Proposal for Membership

To the Board of Directors of the Kiwanis Club of Tempe: We take pride in proposing this application as an active member of our club and have confidence that this individual will become a valuable member.

SIGNATURE OF SPONSOR _____ DATE _____

SIGNATURE OF SPONSOR _____ DATE _____

I accept this proposal for membership and agree to conform to the bylaws of this club and comply with the obligations of membership as explained to me by my sponsor.

SIGNATURE OF APPLICANT _____ DATE _____



(optional)

About Your Family

MARITAL STATUS (SINGLE, MARRIED, DIVORCED):		SPOUSE'S NAME:	
HOW LONG HAVE YOU BEEN MARRIED?	WEDDING DATE:	HOW MANY CHILDREN?	
CHILDREN'S NAMES, AGES, AND WHERE THEY LIVE (IF NOT WITH YOU):			

About Your Professional Life

HOW LONG HAVE YOU HELD YOUR CURRENT JOB?
TELL US MORE ABOUT YOUR WORK OR YOUR BUSINESS:

About Where You Come From

WHERE WERE YOU BORN?	OTHER PLACES YOU'VE LIVED:	
HOW LONG IN THE VALLEY?	WHEN DID YOU MOVE HERE?	WHERE DID YOU MOVE HERE FROM?

The Offbeat and Interesting

YOUR HOBBIES AND INTERESTS:	
MOST FAMOUS PERSON YOU'VE MET:	YOUR LIVING HERO
WHAT I DIDN'T KNOW ABOUT KIWANIS UNTIL NOW:	
OTHER INTERESTING THINGS ABOUT YOU: CLAIMS TO FAME, ACHIEVEMENTS, ODD DISTINCTIONS (MET BARACK OBAMA, PARENT WAS A KIWANIAN, CLIMBED MOUNT MCKINLEY, OWN A '65 MUSTANG, ETC.), USE AN ADDITIONAL SHEET IF NECESSARY.	

More Details for our Secretary

EMAIL ADDRESS:	MOBILE PHONE:
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Questions? Email our secretary at secretary@kcot.org or our bulletin editor at media@kcot.org.